

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.G.		4/5/10
O.I.P.E. CLASSIFIER			5-14-10
FORMALITY REVIEW	LIT	60105	5-30-10
RESPONSE FORMALITY REVIEW	LIT	60105	7-27-10

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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